

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Aiello

Mailing Address PO Box 6155

City State Zip Code
Bossier City LA 71171-6155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Real Estate Developer Owner

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600

Date of Receipt

M M / D D / Y Y Y Y
01 12 2015

Transaction ID : A-CF13791

Amount of Each Receipt this Period

2600

B. Full Name (Last, First, Middle Initial)
Mr. Steve Alford

Mailing Address 153 Saint John Lane

City State Zip Code
Leesville LA 71446-2284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700

Date of Receipt

M M / D D / Y Y Y Y
03 09 2015

Transaction ID : A-CF13887

Amount of Each Receipt this Period

2700

C. Full Name (Last, First, Middle Initial)
Dr. Larry M. Allen

Mailing Address 1 Beaux Rivages Drive

City State Zip Code
Shreveport LA 71106-6806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Shreveport Anesthesia Servc Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
270

Date of Receipt

M M / D D / Y Y Y Y
03 06 2015

Transaction ID : A-CF13879

Amount of Each Receipt this Period

270

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5570.00